

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
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Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

Certificate of Authority

FBE

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements.

1. The business entity is a **limited liability company**.
2. The name of the entity is: **EASTEX TOWER, LLC**
3. The state or country whose law the entity is organized is **Delaware**.
4. The date of organization is **5/31/2016** and the period of duration is **perpetual**.
5. This entity is managed by Managers

**6. Principal Office**

7345 Templeton Gap Road  
Colorado Springs, CO 80923

**7. Required Representatives**

<b>Manager</b>	Eric Chase	1820 Watson LaneNew Braunfels East	TX	78130
<b>Manager</b>	Scott Gindea	1820 Watson LaneNew Braunfels East	TX	78130
<b>Manager</b>	Ian Stringfellow	1820 Watson LaneNew Braunfels East	TX	78130
<b>Manager</b>	Mark Spain	1820 Watson LaneNew Braunfels East	TX	78130
<b>Manager</b>	DAS Purchaser 1 Corp.	1820 Watson LaneNew Braunfels East	TX	78130
<b>Manager</b>	Ontivity, LLC	1820 Watson LaneNew Braunfels East	TX	78130

**8. Registered Agent/Office**

InCorp Services, Inc.  
828 Lane Allen Road Ste 219  
Lexington, KY 40504-3659

I, **Karen Gibson on behalf of InCorp Services, Inc.**, consent to sign for **InCorp Services, Inc.** who serves as the **Registered Agent** on behalf of this Entity.  
on Friday, December 15, 2023

As the Authorized Representative, I, **Scott Gindea**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Manager**